PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents
P.O. Box 1459 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for paramitting the ISSON FEE and FOBLICATION FEE (if required). Blocks I through I should be completed where

maintenance fee notifications. CURRENT CONNESSONDESCE ADDRESS GLAR CR. B.	nek i forma chance of address.	***************************************			
CERRENT CORRESPONDENCE ADDRESS (Some the Stock 1 for may disage of eddress) 27:81 1990 85/08/2007 MEDTRONIC, INC. 7:10 MEDTRONIC PARK WAY NE MINNEAPOLIS, MN 55432-9924			Note: A certificate of mailing can only be used for domestic meilings of the Pec(s) Transmittel. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of raciling or transmission. Certificate of Mailing or Transmission I hereby certify that this Pec(s) Transmittel is being deposited with the United States Postal Service with sufficient passage for first class mail in an environe addressed to the Maili Stop 1988/E. FEE address above, or being facalinite transmitted to the USPTO (\$71) 273-2883, on the date indicated below.		
					(Signature)
		i.	·····		(2003)
APPLICATION NO. FILING DATE		FIRST NAMED INVENTO	OTTA R	RHEY DOCKET NO.	CONFIRMATION NO.
10/773,391 02/05/2004		John D. Worton P11.581.60 63.50		6350	
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Q Change of correspondence address (or Change of Correspondence Address form PTO-8B/122) attached. Q "Fee Address" indication (or "Fee Address" indication from PTO-8B/47) Rev 63-62 or more recent) attached. Use of a Customer Number is required.		(f) the names of up or agents OR, alterna (2) the same of a six registered attempt of	gle firm (having as a memb r agent) and the names of v ternoys or agents. If no nam	S. Girma	L. McDowall Wolde-Miche
3. ASSIGNEE NAME AND RESIDENCE DAT. PLEASE NOTE: Unless an assigner is ideas secondaries as set forth in 37 CPE 3.11. Com (A) NAME OF ASSIGNEE	ified below, so assigned plation of this form is NC	data will appear on the Y a substitute for filing : (B) RESIDENCE: (CI		TRY)	rement has been filed for
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Please check the appropriate assignee category or	t estellaces (soil us, or b	ennement (as one basesse) ;		mmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmm	ad east, m coverages
4a. The Abiliowing list(s) are submitted: 2 june Fes 24 Publication Fee (No small entity discount permitted) 3 Advance Order - # of Copies		(b) Payment of Fec(s): (Please first reappity any previously paid issue for shown above; A check is enclosed. D payment by credit card. Form FTO-2038 is attached. A The Director is hereby sutherized to charge the remained fice(s), any deficiency, or credit any overpayment, to Deposit Account Number (BASH). (excluse as extra copy of this form).			
5. Change in Ensity Status (from sixtus indicate					
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This collection of information is required by 37 on application. Confidentiality is governed by 32 substituting the complished application form to the this form analyse suggestions for reducing this before 1450. Alexandria, Virginia 12313-1450. De Alexandria, Virginia 12313-1450. Denier the Paperwish Boduction Act of 1995, no	c USPIO, Time will vist irden, skonid be soni so d O NOT SEND FEES OR	y depending upon the in to Chief information Of COMPLETED FORMS	freuthat case. Any common Ece, U.S. Patens and Trades TO THIS ADDRESS, SEN	ts on the smout of ti mark Office, U.S. Dep D TO: Commissioner	itie you require to complete arment of Commerce, F.O. for Patents, P.O. Box 1459,